

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing

| | |
|------------------------|-----------------|
| Attorney Docket Number | 5413KST-3 |
| First Named Inventor | DARIO, Paolo |
| COMPLETE IF KNOWN | |
| Application Number | 10/598,043 |
| Filing Date | August 16, 2006 |
| Group Art Unit | |
| Examiner Name | |

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed for and for which a patent is sought on the invention entitled:

TELEOPERATED ENDOSCOPIC CAPSULE EQUIPPED WITH ACTIVE LOCOMOTION SYSTEM

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 17 February 2005 as United States Application Number or PCT International

Application Number PCT/IB2005/000398 and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation in part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or § 365(b) of any foreign application(s) for patent, inventor's or plant breeder's right certificate(s), or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's right certificate(s), or of any Pct international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|-------------------------------------|
| | | | | Yes | No |
| PI2004A000008 | IT | 02/17/2004 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
|-----------------------|--------------------------|--|
| | | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |

DECLARATION -- Utility or Design Patent Application

Page 2

Direct all
Correspondence to:☒ The address associated with
Customer Number:

22442

OR

☐ Correspondence address below

Name

SHERIDAN ROSS PC

Address

1560 Broadway, Suite 1200

City

Denver

State

Colorado

Zip

80202-5141

Country

United States of America

Telephone

303-863-9700

Fax

303-863-0223

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Joint Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Paolo

Family Name or Surname

DARIO

Inventor's Signature

Paolo Dario

Date

01-09-06

Residence: City

Livorno

State

Country

IT

Citizenship

IT

Mailing Address

Via Cimabue, 3

City

Livorno

State

Zip

I-57100

Country

IT

Name of Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Arianna

Family Name or Surname

MENCIASSI

Inventor's Signature

Arianna Mencias

Date

01-09-06

Residence: City

Pontedera

State

Country

IT

Citizenship

IT

Mailing Address

Via Leopardi 6

City

Pontedera

State

Zip

I-56025

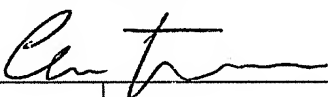
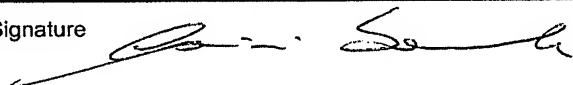
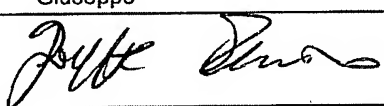
Country


IT

☒ Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB02A or 02LR attached hereto

DECLARATION -- Utility or Design Patent Application

Page 3

| | | | |
|---|-------|---|-------------------|
| Name of Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Cesare | | Family Name or Surname STEFANINI | |
| Inventor's Signature  | | Date 01-09-06 | |
| Residence: City Cascina | State | Country IT | Citizenship IT |
| Mailing Address Via Tosco Romagnola, 1444, Sant'Andrea a Cascina | | | |
| City Cascina | State | Zip I-56021 | Country IT |
| Name of Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Samuele | | Family Name or Surname GORINI | |
| Inventor's Signature  | | Date 01-09-06 | |
| Residence: City Montecalvoli | State | Country IT | Citizenship IT |
| Mailing Address Via Pietrone, 1 | | | |
| City Montecalvoli | State | Zip I-56020 | Country IT |
| Name of Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Giuseppe | | Family Name or Surname PERNORIO | |
| Inventor's Signature  | | Date 01-09-06 | |
| Residence: City Pia | State | Country IT | Citizenship IT |
| Mailing Address Via Liguria 9 | | | |
| City Pia | State | Zip I-56100 | Country IT |

| | | | |
|---|-------|---|-------------------|
| DECLARATION -- Utility or Design Patent Application | | | Page 4 |
| Name of Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Dino | | Family Name or Surname ACCOTO | |
| Inventor's Signature  | | Date 01-09-06 | |
| Residence: City Andrano | State | Country IT | Citizenship IT |
| Mailing Address Via Provinciale, 248 | | | |
| City Andrano | State | Zip I-73032 | Country IT |